FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

IA ETHICS AND CAMPAIGN DISCLOSURE BD

2010 JAN 13 AM 9: 19

	11000010			
COMMITTEE NAME (Must be same as on Statement of Org	anization)			
Vlassis for Council Committee		1 [FORM	***
IMPORTANT: Indicate by # type of committee you are reporting for: (1)Statewide/Legislative/Judge Standing for Retention Candidate (4)County Central Committee (5)County Candidate (6)City Cand Subdivision Candidate (8)County PAC (9)City PAC (10)School 11) Local Ballot Issue	2)State PAC (3)State Party	i <u> </u>	DR-2 Rev. 12/2009) For Office Use On	
CANDIDATE COMMITTEES ONLY:				
Candidate Name Tom Vlassis	Political Party (if applicable)		Scanned	
Office Sought Ward 1 Des Moines City Council	District (if Senate or House)			
Late reports are subject to possible civil and criminal penalties. Pucandidate's committee, and the chairperson, for any other type of the chairperson of the chairpe	committee, is the individual responsible (515) $351-7743$	(7) and 68 e for filing	AA.401(3), the can timely and accura	didate, for a te reports.
OIGHATURE OF PERSON FILING REPORT	TELEPHONE		DATE SI	GNED
I AM FILING A January 19	REPORT FOR (1) ELECTION	/(2)NON-	ELECTION YEA	R.
(report date)	Indicate by	# 2		
CHECK IF AMENDMENT TO REPORT DATED		Local Com	mittees, enter Date	of Election
Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed	of Dissolution Form DR-3. .)	Decemb	er 1, 2009 Local Committees, Ition is held	
STATEMENT OF CASH ON HAND)			
CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is file.)	ash on hand at the end	\$	3,258.63	
ADD TOTAL MONEY TAKEN IN THIS PERIOD	•	•		
Schedule A: Cash Contributions total (Attach Schedu	ule A) (*also see in-kind below)		122.00	
Schedule F: Loans Received total (Attach Schedule				
Schedule H: Total Sales of Campaign Property (Atta				
(Schedule H applies to Candidates' Comm				
	SUB-TOTAL	s	3,380.63	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		•		· · · · · · · · · · · · · · · · · · ·
Schedule B: Expenditures total (Attach Schedule B)	(**also see debts and loans below)		3,182.67	
Schedule F: Loan Repayments total (Attach Schedul			4	
CASH ON HAND at the end of this reporting period (if final repo			197.96	
*UNPAID BILLS (From Schedule D - Attach Schedule D)		•		
IN KIND CONTRIBUTIONS (From Schedule E - Attach Sched				
*OUTSTANDING LOANS (From Schedule F - Attach Schedul				
CONSULTANT BREAKDOWN (Schedule G Attached?)	• - /	D	VEC 1	^
CANDIDATE COMMITTEES ONLY:			_YESN	U
ALUE OF CAMPAIGN PROPERTY (From Schedule H - Attac	th Schedule HI	•		
	•	\$	 	
TATE COMMITTEES: Submit a reconciled campaign account	t Dank Statement in January of each	year.		

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)	(Rev. 07/03)	RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization) Vlassis for Council Committee		CK THIS BOX IF NDING FORM
	<u> </u>	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

RECEIVED (MM/DD/YR)	(if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOF FUND- RAISER
	NUMBER ID#		(spp.,oab(e)		INCOME
11/22/09	CK#	Michael Baldus 501 College Ave.		\$25	
		Des Moines, Iowa 50314			
	ID#	Roger Thompson			
11/24/09	CK#	2000 - 9th Street Des Moines, Iowa 50314		50	L
	ID#				
11/24/09	CK#	Unitemized contributions of less than \$25		47	
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
	ID#				
	CK#				
			SUB-TOTAL	\$ ¹²²	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

(for Schedule A)

SCHEDULE

MONETARY

Reset Form

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES				
CHECK THIS BOX IF AMENDING FORM					

COMMITTEE NAME	(Must be	same as or	n Statement	of O	rganization)
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Vlassis for Council Committee

DATE EXPENDED	CANDIDATE ID NUMBER (if applicable)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
(MM/DD/YR)	AND PAC CHECK NUMBER	,		
	ID#	Christopher's Restaurant	Election Night Reception	
12/1/09	CK#1029	2816 Beaver Ave. Des Moines, Iowa 50310	Election (vigit Reception	\$ 255.00
	ID#	Tom Vlassis	Panayment of Leaves d Ladate d	
12/14/09	CK# 1030	5001 Lyndale Des Moines, Iowa 50310	Repayment of Incurred Indebtedness	2,067.15
	ID#	Sophie Vlassis	Reimbursement for Campaign	
12/17/09 CK# 1	CK# 1031	5001 Lyndale Des Moines, Iowa 50310	Operating Expenses	610.52
	ID#	Christopher's Restaurant	Committee St. C. A.	
12/28/09	CK# ₁₀₃₂	2816 Beaver Ave. Des Moines, Iowa 50310	Campaign Staff Appreciation Dinner	250.00
	ID#			<u> </u>
	CK#		·	
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
[
	CK#			
			CUR TOTAL	

SUB-TOTAL

\$ 3,182.67

TOTAL (if last page of this schedule)

\$ 3,182.67

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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